UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OMB APPROVAL OMB Number: 3235-0076 Expires May 31, 2005 Estimated Average Burden

hours per form 16.00

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

| SEC USI | E ONLY |
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| Prefix | Serial |
| | |
| DATÉ REC | EIVED |
| , | , |

| Name of Offering (check if this is an amendment and name has changed, and indic Advisen Ltd. | cate change.) |
|---|--|
| Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 50 | 06 Section 4(6) UEOE |
| Type of Filing: New Filing Amendment | A STATE OF THE O |
| A. BASIC IDENTIFICATION DAT | ΓΑ |
| 1. Enter the information requested about the issuer | |
| Name of Issuer (check if this is an amendment and name has changed, and indicate Advisen Ltd. | e change.) |
| Address of Executive Offices (Number and Street, City, State, Zip Code) 355 Lexington Avenue, New York, NY 10017 | Telephone Number (Including Area Code) 212-897-4778 |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Not Applicable | Telephone Number (Including Area Code) Not Applicable |
| Brief Description of Business: Offering of strategic information services to the Internet. | e global commercial insurance industry via the |
| Type of Business Organization Corporation business trust Imited partnership, already formed ot limited partnership, to be formed | ther (please specify): |
| | Year THOMSON FINANCIAL |
| Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbra CN for Canada: FN for other foreign in | |

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the SEC 1972 (1/94) 1 of 8 filing of a federal notice.

2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and • Each general and managing partner of partnership issuers. Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Full name (Last name first, if individual) Ruggieri, Thomas P. Business or Residence Address (Number and Street, City, State, Zip Code) 355 Lexington Avenue, New York, NY 10017 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☐ Director General and/or Full name (Last name first, if individual) Jain, Rimaddress (Number and Street, City, State, Zip Code) 355 Lexington Avenue, New York, NY 10017 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director General and/or Full name (Last name first, if individual) Ruggieri, Philip Business or Residence Address (Number and Street, City, State, Zip Code) 355 Lexington Avenue, New York, NY 10017 **Executive Officer** □ Director Beneficial Owner General and/or leck Check Box(es) that Apply: Promoter Full name (Last name first, if individual) Bradford, David K. Business or Residence Address (Number and Street, City, State, Zip Code) 355 Lexington Avenue, New York, NY 10017 Executive Officer Director General and/or Check Box(es) that Apply: Promoter Beneficial Owner Full name (Last name first, if individual) Wagner, Kenneth E. Business or Residence Address (Number and Street, City, State, Zip Code) 355 Lexington Avenue, New York, NY 10017 Executive Officer Director General and/or Beneficial Owner Check Box(es) that Apply: Promoter Full name (Last name first, if individual) Cruickshank, Robert W. Business or Residence Address (Number and Street, City, State, Zip Code) 355 Lexington Avenue, New York, NY 10017 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer □ Director Full name (Last name first, if individual) Clements, John Business or Residence Address (Number and Street, City, State, Zip Code) 355 Lexington Avenue, New York, NY 10017 (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

A. BASIC IDENTIFICATION DATA

| A. BASIC IDENTIFICATION DATA |
|---|
| 2. Enter the information requested for the following: |
| • Each promoter of the issuer, if the issuer has been organized within the past five years; |
| • Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; |
| • Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and |
| • Each general and managing partner of partnership issuers. |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or |
| Full name (Last name first, if individual) Clark, Robert H. |
| Business or Residence Address (Number and Street, City, State, Zip Code) 355 Lexington Avenue, New York, NY 10017 |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or |
| Full name (Last name first, if individual) Strackbein, Ronald G. |
| Business or Residence Address (Number and Street, City, State, Zip Code) 355 Lexington Avenue, New York, NY 10017 |
| eck Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or |
| Full name (Last name first, if individual) |
| Business or Residence Address (Number and Street, City, State, Zip Code) |
| neck Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or |
| Full name (Last name first, if individual) |
| Business or Residence Address (Number and Street, City, State, Zip Code) |
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| Business or Residence Address (Number and Street, City, State, Zip Code) |
| (Use blank sheet, or copy and use additional copies of this sheet, as necessary.) |

| | | | | | B. IN | FORMAT | TON ABO | UT OFFE | RING | | | | |
|-----|-----------------------------------|--|---|--|--|--|---|--|--|---|---|------------------------------|------------------------------|
| 1. | Has the | issuer sol | d, or does | the issuer i | ntend to se | ell, to non-a | accredited | investors is | n this offeri | ng? | | Yes | No |
| | | | | An | swer also | in Appendi | ix, Column | 2, if filing | under ULO | DE. | | | |
| 2. | What is | the minin | num invest | ment that v | will be acc | epted from | any indiv | idual? | | | | <u>\$10,00</u> | 00 |
| 2 | D 41- | - CC : | | . 1 | | 1 ::0 | | | | | | Yes | No |
| 4. | Enter the commiss offering and/or | ne information or signification or signi | ition reque imilar rem rson to be te or states | ested for ea nuneration listed is a s, list the r | ch person for solicits n associat ame of th | who has bation of pred person e broker o | oeen or will urchasers or agent of r dealer. | ll be paid of the connect of a broker lf more that | or given, di ion with sa or dealer i | rectly or in the of sec registered registered representations | ndirectly, any urities in the with the SEC be listed are ronly. | | <u></u> □ |
| Fu | Il Name | (Last nam | e first, if in | idividual) | | | | | | | | | |
| Bu | siness or | Residenc | e Address | (Number a | and Street, | City, State | e, Zip Code | e) | | | | | |
| Na | me of As | ssociated l | Broker or I | Dealer | | | | | | | | | |
| Sta | ites in W | hich Perso | on Listed F | Ias Solicite | d or Inten | ds to Solici | it Purchase | rs | | | | | |
| (| Check "A | All States' | or check | individual | States) | | | | | | | 🔲 . | All States |
| | [AL] [IL] [MT] [RI] | [AK] [IN] [NE] [SC] | [AZ] [IA] [NV] [SD] | [AR] [KS] [NH] [TN] | [CA] [KY] [NJ] [TX] | [CO] [LA] [NM] [UT] | [CT] [ME] [NY] [VT] | [DE] [MD] [NC] [VA] | [DC] [MA] [ND] [WA] | [FL] [MI] [OH] [WV] | [GA] [MN] [OK] [WI] | [HI] [MS] [OR] [WY] | [ID] [MO] [PA] [PR] |
| Fu | ll Name | (Last nam | e first, if in | idividual) | | | | | | · · · · · · · | | | |
| Bu | siness or | Residenc | e Address | (Number a | and Street, | City, State | e, Zip Code | *) | | | | | |
| Na | me of As | ssociated 1 | Broker or I | Dealer | | | | | | | | | |
| Sta | ites in W | hich Perso | on Listed H | Ias Solicite | d or Inten | ds to Solici | t Purchase | rs | | | | | |
| (| Check "A | All States' | or check | individual i | States) | | | | | | | 🔲 🕹 | All States |
| ! | [AL] [IL] [MT] [RI] | [AK] [IN] [NE] [SC] | [AZ] [IA] [NV] [SD] | [AR] [KS] [NH] [TN] | [CA] [KY] [NJ] [TX] | [CO] [LA] [NM] [UT] | [CT] [ME] [NY] [VT] | [DE] [MD] [NC] [VA] | [DC] [MA] [ND] [WA] | [FL] [MI] [OH] [WV] | [GA] [MN] [OK] [WI] | [HI] [MS] [OR] [WY] | [ID] [MO] [PA] [PR] |
| Fu | ll Name | (Last nam | e first, if in | dividual) | | | | - | | | _ | | |
| Bu | siness or | Residenc | e Address | (Number a | and Street, | City, State | e, Zip Code | e) | | | | | |
| Na | me of As | ssociated I | Broker or I | Dealer | | | | | | | | | |
| | | | | (Use blank | sheet, or o | copy and us | se addition | al copies o | f this sheet, | as necessa | ry.) | | |

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Aggregate **Amount Already** Type of Security Offering Price Sold Debt 2,500,000 \$ 2,000,000 Equity..... □ Preferred [7] Common \$ none none Convertible Securities (including warrants)..... \$ Partnership Interests..... none none \$ Other (Specify:) none none 2,500,000 \$ 2,000,000 Total Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number **Dollar Amount Investors** of Purchases 5 2.000,000 Accredited Investors 0 \$ 0.00 Non-accredited Investors \$ Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of **Dollar Amount** Type of offering Security Sold Rule 505..... Regulation A --\$ Rule 504..... \$ Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees \$ Printing and Engraving Costs. \$ 60.000 Legal Fees \$ Accounting Fees.... Engineering Fees. Sales Commissions (specify finders' fees separately)..... _____ \$ Other Expenses (identify) Total 60,000

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

| b. Enter the difference between the aggregate offer Part C –Question 1 and total expenses furnished in 4.a. This difference is the "adjusted gross proceeds | response to Part C - Question | | | \$ | 2,440,000 |
|---|--|-------------------------------|--|--|-----------------------|
| 5. Indicate below the amount of the adjusted gross proposed to be used for each of the purposes sh purpose is not known, furnish an estimate and chestimate. The total of the payments listed must equ to the issuer set forth in response to Part C - Questice | proceeds to the issuer used or lown. If the amount for any eck the box to the left of the lal the adjusted gross proceeds | ! | | | |
| | | | Payments to Officers, | | Downsonts To |
| | | | Directors, & Affiliates | | Payments To Others |
| Salaries and fees | | <u> </u> | 0.00 | <u></u> <u>\$</u> | 0.00 |
| Purchase of real estate | *************************************** | <u> </u> | 0.00 | <u> s</u> | 0.00 |
| Purchase, rental or leasing and installation of machine | ery and equipment | <u> </u> | 0.00 | <u>\$</u> | 0.00 |
| Construction or leasing of plant buildings and facilitie | S | <u> </u> | 0.00 | <u>s</u> | 0.00 |
| Acquisition of other businesses (including the value of | | | | | |
| offering that may be used in exchange for the assets or se pursuant to a merger) | | □ \$ | 0.00 | s | 0.00 |
| Repayment of indebtedness | | | 0.00 | — П <u>°</u> | 0.00 |
| Working capital | | | 2,440,000 | | 0.00 |
| Other (specify) | | | 0.00 | | 0.00 |
| Column Totals | | =- | 2,440,000 | <u></u> | 0.00 |
| Total Payments Listed (column totals added) | | | ⊠ \$ | 2,440,000 | |
| The issuer has duly caused this notice to be signed following signature constitutes an undertaking by the its staff, the information furnished by the issuer to any | issuer to furnish to the U.S. See non-accredited investor pursu | horized p | and Exchange Con | mmission, up | under Rule 505, the |
| The issuer has duly caused this notice to be signed following signature constitutes an undertaking by the its staff, the information furnished by the issuer to any Issuer (Print or Type) | by the undersigned duly authissuer to furnish to the U.S. Se | horized p | and Exchange Con | mmission, up | on written request of |
| The issuer has duly caused this notice to be signed following signature constitutes an undertaking by the its staff, the information furnished by the issuer to any Issuer (Print or Type) | by the undersigned duly authissuer to furnish to the U.S. Se non-accredited investor pursu | horized pecurities pant to pa | and Exchange Cor aragraph (b)(2) of | mmission, up Rule 502. | on written request of |
| The issuer has duly caused this notice to be signed following signature constitutes an undertaking by the | by the undersigned duly authissuer to furnish to the U.S. Se non-accredited investor pursu | horized pecurities pant to pa | and Exchange Cor aragraph (b)(2) of | mmission, up Rule 502. | on written request of |
| The issuer has duly caused this notice to be signed following signature constitutes an undertaking by the its staff, the information furnished by the issuer to any Issuer (Print or Type) Advisen Ltd. Name of Signer (Print or Type) | by the undersigned duly authissuer to furnish to the U.S. Se non-accredited investor pursu Signature Title of Signature | horized pecurities hant to pa | and Exchange Cor aragraph (b)(2) of | mmission, up Rule 502. Date June 30 | on written request of |
| The issuer has duly caused this notice to be signed following signature constitutes an undertaking by the its staff, the information furnished by the issuer to any Issuer (Print or Type) Advisen Ltd. Name of Signer (Print or Type) | by the undersigned duly authissuer to furnish to the U.S. Se non-accredited investor pursu Signature Title of Signature | horized pecurities hant to pa | and Exchange Cor aragraph (b)(2) of I | mmission, up Rule 502. Date June 30 | on written request of |
| The issuer has duly caused this notice to be signed following signature constitutes an undertaking by the its staff, the information furnished by the issuer to any Issuer (Print or Type) Advisen Ltd. | by the undersigned duly authors issuer to furnish to the U.S. See non-accredited investor pursue. Signature President and ATTENTION | horized pecurities nant to pa | and Exchange Coraragraph (b)(2) of I | mmission, up Rule 502. Date June 30 er | on written request of |